

Novel Clinical Trial to Improve the Quality of PSA Screening Decisions for Black Men and Their Healthcare Providers

NYU Case of the Month, November 2019

Danil V. Makarov, MD,¹ Joseph E. Ravenell, MD, MS²

Department of Urology, NYU Langone Health, New York, NY; Departments of Population Health and Medicine, NYU Langone Health, New York, NY

[Rev Urol. 2019;21(4):178–179]

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Prostate cancer is the most common non-skin cancer in American men, and the disease hurts black men disproportionately. Healthy men without any symptoms can undergo screening for prostate cancer using a blood test called prostate-specific antigen or PSA. PSA is a protein made by both healthy and cancerous prostate tissue that is often elevated in men with prostate cancer. The challenge with PSA testing is that it can also be elevated with certain common benign conditions, making it an imperfect test. Experts agree that PSA-based prostate cancer screening, at a population level, is a trade-off between length and quality of life.

Shared Decision Making Considered Best Practice for PSA Screening

Decision scientists and clinicians agree that PSA-based prostate cancer screening is a decision best made by men and their doctors. Ideally, such a decision would incorporate the patient's preferences and

the doctor's professional judgment. This strategy is called *shared decision making* and is considered best practice for PSA screening. However, despite the consensus, shared decision making is not happening as often as it should in clinical practice, especially for black men. At NYU Langone Health, we are committed to supporting patients to make the best decisions about their healthcare, and we are committed to reducing unjust healthcare disparities. For this reason, a group of our clinicians and researchers have dedicated themselves to figuring out the best way to help black men make decisions about PSA screening, decisions that are informed by the best medical evidence, and incorporate patient values and preferences.

One big reason why shared decision making may not be happening in clinical practice is that it can take a lot of a doctor's (or other healthcare provider's) time. If there were a way for patients to have decision coaching by a non-physician, it might facilitate shared decision making by making it less expensive and more time efficient.

Understanding the Efficacy of a Community Health Worker–led Decision Coaching Program

Our group has shown that community health workers, laypersons from the patient's community who have trained in understanding and facilitating a specific healthcare task, can be as effective as doctors in helping patients understand complicated medical concepts. Focused on PSA screening among black men at Flatbush Family Health Center at NYU Langone in Brooklyn, our group is currently recruiting for a clinical trial designed to understand the efficacy of a community health worker–led decision coaching program to facilitate shared decision making. We are reaching out to black men with scheduled primary care office appointments. Everyone in the study receives a decision aid about prostate cancer

screening. Then patients are randomly assigned into two groups. Group 1 receives community health worker–led decision coaching focused on PSA screening. Group 2 receives decision coaching focused on non-PSA-related health topics endorsed by the American Heart Association. All participants in the study answer questions related to their knowledge of prostate cancer screening and their decision-making experience. All participants receive compensation for their time in the study.

Commitment to Health Equity

NYU Langone Health is greatly invested in helping men make the best possible, individually tailored decisions about PSA screening, and we are committed to the fight against healthcare disparities. Decision coaching is

an evidence-based approach to improve decision quality in many clinical contexts. However, its benefits are incompletely understood in the context of PSA screening for black men seeing their primary care doctors. Our study to evaluate a community health worker–led decision coaching program for PSA screening is an important step to understand the benefits of this approach. If successful, the study has a high potential to be scaled across a broad group of clinics and to have a significant public health impact. The results of our study will determine the efficacy, participant experience, and cost outcomes critical to such a widespread implementation effort of shared decision making in PSA screening.

Please contact 1-646-501-9836 if you or your patients have any questions about this important study or are interested in enrolling. ■